

SUMMARY OF RULE CHANGES

EFFECTIVE JULY 6, 2013

Extensive revisions to Articles 2, 3 and 5 were approved by the Governors Regulatory Review Council on May 7, 2013. Additionally minor changes were made to Article 1 (Definition) and R4-19-701 (Public Participation Procedures). The changes are summarized below, however to obtain more accurate and complete information, please access the applicable Notice of Final Rulemaking available on the Board's website at www.azbn.gov.

ARTICLE 1 CHANGES

R4-19-101. Definitions

The Board amended this Section by adding definitions of: "admission cohort", "eligibility for graduation", "substance use disorder" "CMA", "verified application" and "CES". The definition for "regionally accredited" was updated to allow for name changes in regional accrediting organizations.

Table 1.

This table was amended to delete the Certified Registered Nurse Anesthetist (CRNA) prescribing time-frames as statutory changes effective August 2, 2012 prohibit a CRNA from prescribing and add CRNA certification, temporary certification and renewal time-frames consistent with statutory changes. In addition, consistent with A.R.S. §32-1650, time-frame requirements for Certified Medication Assistants were included. Other amendments were made to make time-frames for response to a deficiency notice consistent for similar license/certification types.

ARTICLE 2 CHANGES

R4-19-201. Organization and Administration

The Board amended this Section to require: continuing evidence of institutional accreditation; evaluation of graduation and attrition rates of each cohort; specific evaluation components related to protection of patient safety; and an articulation agreement if providing an associate degree RN program.

R4-19-202. Resources, Facilities, Services and Records

This rule is amended to clarify the standards by which program resources will be evaluated. Amendments include the articulation of requirements for office space, student facilities, conference rooms, dedicated support personnel, access to learning resources and equipment and access to current technology.

R4-19-203. Administrator; Qualifications and Duties

The Board amended this section to: require that both RN and PN nursing program administrators hold a minimum of a graduate degree in nursing, have 3 years nursing experience and at least one year teaching experience in a pre-licensure nursing program; provide for the appointment of an interim program director if Board qualifications are not

met; clarify that the administrator has a duty to evaluate faculty when performance concerns arise; clarify that safety requirements for faculty and students be equivalent; require policies regarding minimum nursing skill set and knowledge for both students and faculty for the type of clinical unit assigned; require that the nursing program administrator not administer any other program unless there is an appointed assistant administrator.

R4-19-204. Faculty; Personnel Policies; Qualifications and Duties

Amendments to this section requires written policies for orientation, continuous learning and evaluation of faculty.

R4-19-205. Students; Policies and Admissions

The Board amended this Section to: delineate the duty of nursing programs to provide resources for admitted students and limit admissions if resources are not available; require written admission and progression criteria that are evidence-based; require a nursing program to enforce policies; require that certain policies be available to the general public; clarify notification that must be given to change policies.

R4-19-206. Curriculum

The Board amended this Section to: clarify that clinical sites provide experiences that meet objectives; detail the standards for a written curriculum; clarify course requirements including the inclusion of the Quality and Safety Education in Nursing (QSEN) competencies recommended by the Institute of Medicine (IOM) to reduce error; specify standards for precepted experiences; allow an LPN program to engage in precepted clinical experiences; allow for simulation as long as it does not completely substitute for a clinical experience; and establish an on-time graduation standard of 45% annually. The minimum NCLEX first time pass rate was raised to 80%. If a program is below 80% for 2 consecutive years, they will receive a Notice of Deficiency; if a program falls below 75% any year, they will receive a Notice of Deficiency.

R4-19-207. New Programs; Proposal Approval; Provisional Approval

The Board amended this Section to: require that a qualified nurse write or direct the proposal and provisional applications; require new programs to merely notify other programs of their intent rather than estimating the effect on other programs; clarify that programs must be structured consistent with Board regulations; amend evidence requirements regarding accreditation; require curriculum development at the proposal stage; provide evidence that clinical sites are secured for projected enrollment at both proposal and provisional stages; require that entities seeking to establish a program in Arizona that are in other jurisdictions have NCLEX and attrition results consistent with Arizona regulations and have no substantiated complaints; limit enrollment to 60 students per year until Board verifies that the program is compliant with regulations; require a report within one year and a Board site visit to verify compliance; limit expansion of enrollment and sites; and provide for an administrative hearing if provisional approval is rescinded

R4-19-209. Nursing Program Change

The Board amended this Section to: require that nursing program changes be supported by evidence; clarify which changes to mission and goals need approval; clarify that length of the program refers to academic credits in nursing; clarify that deleting a geographical location does not need approval; require all programs regardless of size to gain approval to increase admissions annually by 30 students or more; and requiring Board approval to establish a modification of a program with alternate admission or graduation requirements.

R4-19-211. Unprofessional Conduct

The Board added this new Section regarding acts that would be considered unprofessional program conduct.

R4-19-212. Notice of Deficiency

The Board re-titled and amended this Section to improve clarity and understandability and allow for more options including discipline for programs that are non-compliant or have additional violations. Additionally a provision was added preventing a program under discipline or threat of discipline from merely closing and re-opening for a period of two years.

R4-19-213. Nursing Programs Holding National Program Accreditation

The Board amended this Section to: provide additional clarity regarding the relationship between the Board and nationally accredited nursing programs; clarify that programs are required to submit a copy of all accreditation reports to the Board following an accreditation visit; and require programs to notify the Board of all accrediting agency site visits.

R4-19-214. Pilot Programs for Innovative Approaches in Nursing Education

The Board adopted this new Section to allow for programs to apply for innovation and rule variance to explore new approaches to nursing education. The Section is consistent with national models for approving innovative programs and requires evidence and extensive evaluation of the innovative approach.

R4-19-215. Voluntary Termination of a Nursing Program or a Refresher Program

Amendments to this section clarify that a program is considered voluntarily terminated when it no longer admits or plans to admit students after current students graduate.

R4-19-216. Approval of a Refresher Program

The Board amended this Section to: incorporate curriculum recommendations from stakeholders including the addition of Quality and Safety in Education for Nurses (QSEN) competencies; establish qualifications of the administrator and faculty; require private entities to purchase insurance or a bond and a fire inspection report; provide an opportunity for an applicant who completed a refresher program in another jurisdiction to have the program accepted by the Board for licensure purposes; report program changes to the Board; and to provide for hearing rights.

R4-19-217. Distance Learning Nursing Programs; Out-of-State Nursing Programs

Amendments to this Section include requiring out of state programs seeking clinical opportunities in Arizona to submit evidence of clinical placement of students and residential faculty to supervise the clinical experience. Other amendments are made to this Section to improve clarity, conciseness or understandability.

ARTICLE 3 CHANGES

The Arizona State Board of Nursing (Board) amended Article 3 for the following reasons:

1. To improve consistency between the Board's rules and other state laws, specifically A.R.S. §§ 32-3208 and 41-1080 regarding mandatory reporting of criminal offenses and proof of legal presence.
2. To incorporate "Uniform Licensure Requirements" adopted by the Delegate Assembly of the National Council of State Boards of Nursing in August, 2011. These requirements establish consistency between nursing regulatory agencies across the country.
3. To implement the plan for rule revision approved by the Governor's Regulatory Review Council on April 6, 2010, as part of the 5 year rule review of Article 3.

Additionally the Board is amending Article 1 to incorporate additional definitions needed in Article 3. Specific changes to each Section are detailed below.

R4-19-301. Licensure by Examination

This rule was amended to clarify the requirements for licensure, including incorporating the criminal reporting requirements of A.R.S. § 32-3208 and the citizenship and alien status requirements of A.R.S. § 41-1080. Additionally the Board added the following uniform licensure requirements: self-report of substance use disorder, current investigations and actions on licenses by other jurisdictions; participation in alternative to discipline programs; licensure of applicants eligible to graduate; role-delineation education for graduates of RN programs who want to obtain a practical nurse license; and self-report of licensure status for internationally licensed nurses. The Board also amended the acceptable English language proficiency tests and revised the passing standards consistent with the research studies.

R4-19-302. Licensure by Endorsement

The Board amended this Section to incorporate a provision for licensure of applicants who do not meet the educational requirements of the Board, but are licensed in other jurisdictions and practicing safely.

R4-19-303. Requirements for Credential Evaluation Service (CES)

The Board amended this Section to remove the expiration provision for approval of a CES and add a requirement for a CES to report on the status of any international licenses held.

R4-19-304. Temporary License

The Board amended this Section to clarify that the applicant does not need a current nursing license to qualify for a temporary license and clarified that the Board may issue a temporary license for the sole purpose of completing clinical requirements for a refresher or competency evaluation program for a nurse who does not meet the practice requirement.

R4-19-305. License Renewal

The Board amended this Section to include the criminal reporting requirements in A.R.S. § 32-3208 and uniform licensure requirements similar to amendments to R4-19-301. The Board added a provision for non-issuance of a renewal license until an investigation has been completed and the Board renders a decision if the applicant has a current or previous license in another jurisdiction that is or was revoked, surrendered, denied, suspended or placed on probation in another jurisdiction. Additionally, the Board amended this Section to allow for the collection of workforce data.

R4-19-306. Inactive License

The Board amended this Section to specify provisions for transferring a license to retirement status.

R4-19-307. Application for a Duplicate License

The Board clarified requirements for a duplicate license and incorporated electronic communication methods in this Section.

R4-19-308. Change of Name or Address

The Board amended this Section to incorporate electronic communication methods.

R4-19-309. School Nurse Certification Requirements

At the request of stakeholders the Board amended the requirements for school nurse certification to: eliminate award of certification without additional education, recognize national certification, and clarify the renewal requirements. This rule also amended application requirements to be consistent with the amendments to R4-19-301 and R4-19-305.

R4-19-310. Certified Registered Nurse

The Board is amending this Section to reflect the name change of a certifying agency.

R4-19-312. Practice Requirement

The Board amended this Section to clarify that international nursing practice meets the practice requirement and the circumstances under which care of a relative will meet the practice requirement.

R4-19-313. Background

The Board added this New Section for the purpose of incorporating the standards in “Uniform Licensure Requirements” adopted by the Delegate Assembly of the National Council of State Boards of Nursing in August, 2011, regarding evaluations for applicants disclosing substance use disorder or criminal convictions of a sexual nature.

ARTICLE 5 CHANGES

The Arizona State Board of Nursing (Board) is amending Article 5 for the following reasons:

1. To improve consistency between the Board's rules and other state laws, specifically A.R.S. §§ 32-3208 regarding mandatory reporting of criminal offenses which was amended in R4-19-505.

2. To incorporate "Uniform Licensure Requirements" adopted by the Delegate Assembly of the National Council of State Boards of Nursing (NCSBN) in August, 2011 and the "APRN Consensus Model for APRN Regulation: Licensure, Accreditation, Certification, and Education" (Consensus Model) adopted by NCSBN on July 7, 2008. These requirements establish consistency between nursing regulatory agencies across the country. Consistent with the consensus model the term "population focus" is replacing the term "specialty area". However, due to current lack of congruence between education and certification, the Board is proposing more than the six population foci envisioned by the model.

"The requirements [of the consensus model]... specify that all APRNs will be educated, certified, and licensed in one of four roles and in at least one of six population foci. ...Education, certification, and licensure of an individual must be congruent in terms of role and population foci.

APRNs may specialize but they cannot be licensed solely within a specialty area. Specialties can provide depth in one's practice within the established population foci. APRNs may also decide to choose a specialty to add to the level of care they can offer within their chosen population. Competence at the specialty level will not be assessed or regulated by boards of nursing but rather by professional organizations."

https://www.ncsbn.org/Consensus_Model_for_APRN_Regulation_July_2008.pdf

3. To implement the plan for rule revision approved by the Governor's Regulatory Review Council on May 3, 2011 as part of the 5 year rule review of Article 5.

4. To reflect statutory changes regarding Certified Registered Nurse Anesthetists contained in Senate Bill 1362 which became effective August 2, 2012.

5. Other changes are made to provide clarity and understandability.

6. Changes to specific rules that fall into other categories are explained below.

R4-19-504. Notice of Deficiency; Unprofessional Program Conduct

The Board added a subsection to this Section to specify conditions under which a disciplinary action may be issued against an APRN program.

R4-19-506. Expiration of APRN Certificate; Practice Requirement; Renewal

The Board deleted the option of maintaining certification to meet the practice requirement in subsection A. The Board is aware of nurses who have not practiced advanced practice or registered nursing for 5 or more years yet are able to maintain APRN certification through CE and self-study tests. The Board believes and evidence supports that practice in the role is essential to maintain competencies. This amendment is similar to that for RN and LPN licensure renewal.